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FEC FORM 2

STATEMENT OF CANDIDACY

_	(a) Name of Opendidate (in full)									
١.	(a) Name of Candidate (in full)									
	Patti, Thomas, , , (b) Address (number and street)		ook if oddro	an ahangad		2 Candidat	te's FEC Identi	fication N	umbor	
	2229 Stewart Street		eck if addre	ss changed		H2CA0		iication iv	umber	
	(c) City, State, and ZIP Code					3. Is This	New	1	Amended	
	Stockton		CA	9520	5	Statem	ent (N)	OR	x (A)	
4.	Party Affiliation	5. Office Sough	nt		6. State & Dist	rict of Candid	late			
	REPUBLICAN PARTY	House			CA	09				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following nar	med political con	nmittee as m	y Principal (Campaign Comr	mittee for the	2022 (year of election	election)	n(s).	
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)									
	Tom Patti For Cong	ress								
	(b) Address (number and street) 9460 Tegner Road									
	(a) Oite Olate and 7ID Oads									
	(c) City, State, and ZIP Code									
	Hilmar				CA	95324				
	DE	SIGNATION	I OE OTI	JED AII	TUODIZED	COMMIT	TEEC			
	DL				g Representativ		ILLS			
8.	I hereby authorize the following nancandidacy.	ned committee,	which is NO	Γ my principa	al campaign con	nmittee, to red	ceive and expe	end funds	on behalf of my	
	NOTE: This designation should be f	iled with the prir	icipal campa	ign committe	ee.					
	())) ((((((((((((((((
	(a) Name of Committee (in full) Patti for CA-09									
	(b) Address (number and street)									
	PO Box 30844									
	(c) City, State, and ZIP Code									
	Bethesda				MD	20824				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Sig	gnature of Candidate					Date				
Pa	utti, Thomas, , ,			[Elect	ronically Filed]	09/01/202	22			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	Take Back the House 2022							
	(b) Address (number and street) PO Box 30844							
	(c) City, State, and ZIP Code							
	Bethesda	MD	20824-0844					
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full) NRCC California Victory							
	(b) Address (number and street) 228 S. Washington Street							
	Suite 115							
	(c) City, State, and ZIP Code Alexandria	VA	22314					
8.	I hereby authorize the following named committee, which is NOT my princi candidacy. NOTE : This designation should be filed with the principal camp							
	(a) Name of Committee (in full) Patti Victory Fund							
	(b) Address (number and street) 9460 Tegner Road							
	(c) City, State, and ZIP Code							
	Hilmar	CA	95324					
8.	nereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	Take Back the House California 2022							
	(b) Address (number and street) PO Box 30844							
	(c) City, State, and ZIP Code							
	Bethesda	MD	20824					